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FACT SHEET

Disease Early Warning System (DEWS)

OVERVIEW

Communicable disease accounts for 60 to 80 percent of all outpatient visits and more than half of all deaths in Afghanistan. Consequently, control of communicable disease is one of the highest priorities for the Ministry of Public Health (MoPH). In 2006, the World Health Organization (WHO), with USAID support, developed the Disease Early Warning System (DEWS) for Afghanistan to reduce morbidity and mortality through early detection and response to disease outbreaks.

Through monitoring sites in all 34 provinces, the DEWS provides accurate and timely information on disease outbreaks and seasonal trends. Investigations result in quick action to mitigate disease outbreaks and prevent epidemics and death. The DEWS also helps coordinate public health surveillance in the field, disseminates public health information, and collaborates with polio eradication and the Expanded Programme on Immunizations (EPI) initiatives.

ACTIVITIES

- **Infectious disease monitoring** – Conducting weekly reporting on 15 priority infectious diseases from 175 sentinel sites. DEWS is expanding its sentinel sites to one per 200,000 citizens, or one for every two districts.
- **Outbreak investigations** – Conducted an average of five outbreak investigations across the country each week in second quarter of 2009, including 32 outbreaks of measles and 15 of pertussis. Approximately 88 percent of outbreaks were investigated within 48 hours of first report.
- **Monthly disease control coordination meetings** – Participating in coordination meetings in every province and collaborating with disease control programs such as National Polio Eradication.
- **Integrating DEWS with polio and Novel Influenza A (H1N1/swine flu) surveillance** – Conducting national-level DEWS coordination and training meetings.
- **Logistical support of the reverse cold chain** – Storing and transporting specimens at recommended temperatures to ensure that they arrive at the Central Public Health Laboratory in good condition.
- **Quality control** – Introducing internal standard operating procedures and external quality assurance measures. Viral specimens of cases of influenza-like illnesses are sent to the NAMRU3 reference lab in Cairo and measles specimens to National Institutes of Health laboratory in Islamabad for confirmation.

RESULTS

- Investigated and controlled 54 outbreaks of pertussis, 44 of measles, 38 of diarrhea, 17 of avian flu, 14 of acute respiratory illness, six of hepatitis, five of malaria, four of typhoid, four of Crimean-Congo hemorrhagic fever, and other outbreaks including chicken pox, mumps, and Gulran Disease in 2008.
- Improved laboratory surveillance capacity. Afghanistan was able to isolate influenza virus and Bordetella pertussis and diagnose cases of Crimean-Congo hemorrhagic fever for the first time.
- Identified three subtypes of cholera in 2008 and quickly controlled a nationwide outbreak of cholera with an extremely low mortality rate.
- Discovered the prevalence of rotavirus in more than 50 percent of children hospitalized with diarrhea and found the first positive cultures of hemophilus influenza in cerebrospinal fluid.
- Developed an H1N1 (*swine flu*) toolkit in Dari and Pashto and disseminated copies nationwide.